



Malnutrition: Appropriate Responses to the Problem

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Overall Objectives

- To mitigate and treat malnutrition in vulnerable groups, especially young children and their mothers;
- To arrest the current deterioration in the health and nutritional status of the population; and
- Targeted emergency food assistance to most vulnerable populations.

Nutrition Strategy

1. Develop a national nutrition strategy;
2. Design and implement appropriate behavior change and communication strategies;
3. Support and encourage breast-feeding and appropriate complementary feeding;
4. Ensure availability of appropriate micronutrient (vitamin and mineral) supplementation for vulnerable groups, especially young children and pregnant women;
5. Train and increase the capacity of health professionals and staff from relevant sectors (e.g., Ministry of Education);
6. Develop and institute protocols and guidelines in areas related to food and nutrition;
7. Support applied research in areas related to food and nutrition;
8. Develop a sustainable unified nutrition monitoring and surveillance system;
9. Ensure an uninterrupted continuation of the national vaccination program;
10. Introduce and ensure compliance of appropriate iron fortification policies;
11. Advocate for protecting households suffering from long-term food shortages (targeted food assistance); and
12. Coordinate closely with other sector programming, such as water.

Existing Coordination Mechanisms

Nutrition Council: Ministry of Health, Ministry of Supply, Ministry of Finance, other.

Nutrition Thematic Group: Donors and NGOs working on broad nutrition-related topics.

Micronutrient Committee: MoH, Donors and NGOs focusing on micronutrient deficiencies.

Diagnosis of the Problem

Although the West Bank demonstrates a concerning prevalence of acute malnutrition, the Gaza Strip, faces a distinct ***humanitarian emergency*** in regards to GAM, enhanced by these critical accompanying factors:

- Infants, young children, and reproductive age women require adequate protein in their diets to prevent anemia and protein-energy malnutrition.
- Market disruptions from curfews, closures, military incursions, border closures, and checkpoints affected key high protein foods, especially meat and poultry and dairy products, ***and in particular, infant formula and powdered milk.***
- Preschool aged children show decreased caloric and micronutrient intake, especially iron, vitamin A, and zinc, perpetrating and contributing to the high prevalence of acute malnutrition, anemia, and affecting immune system development.
- Reproductive age women have a significant prevalence of macro and micronutrient deficiencies
- Health care providers may not be adequately identifying and diagnosing malnutrition in the community due to the fact that:

Nutrition is defined not only by quantity of food but particularly by quality of food. Energy, measured by calorie consumption and protein are referred to as macronutrients while vitamins and minerals also critical for normal healthy development constitute micronutrients.